

Welcome to the 2024 AMMP New Awardee Meeting

February 19, 2025



I received an email
saying I've been
awarded a 2024 AMMP
grant – now what?

Award to Agreement



6 Steps Before Starting Project Implementation

1. Adobe Sign STD 204 - Payee Data Record form.
2. Pre-project consultation (PPC)
3. Email from Program: project grant packet sent to the CDFA Office of Grants Administration (OGA).
4. First Email from OGA: review of drafted Grant Agreement and signature required.
5. Second Email from OGA: receive a copy of your Executed Grant Agreement.
6. Introduction Email from your assigned Program Analyst with Invoice templates.

Award to Agreement

• Application Period (July 23 – October 18, 2024)

• Application Review (October 2024 – January 2025)

• **Award Notification (Feb 13, 2025)**

•  Recipient completes **STD 204** via Adobe Sign

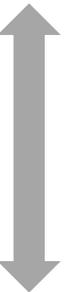
• **PPCs** conducted

• Program sends project info/grant packet to OGA

• OGA sends recipient Agreement for review

•  Recipient returns signed grant agreement pages

• OGA sends recipient **fully executed Grant Agreement**

•  Program sends recipient **Introduction Email**

• Project implementation can begin (*anticipated June 1, 2025*)



Project work should not begin until the specified grant term has started AND the grant agreement is fully executed, whichever date is later.

STEP #1

STD 204

Payee Data Record

- What is the STD 204 and what is it used for in the Grant Process?

The STD 204 is a form that is completed by the recipient with their IRS information. The form is required when receiving payment from the State of California.

- The STD 204 needs to be completed in a timely manner as no other process can be completed without an approved form.
- After the form is submitted to the AMMP program it travels to two other entities (Financial Services and FI\$Cal) before approval or denial is determined.

STD204 Delivery Method

- The STD 204 will be sent electronically using **Adobe Sign**
- Will come from Adobe Sign associated email address (adobesign@adobesign.com)
- These should be emailed starting tomorrow 2/20!



Gregory Ferrero requests your signature on
STD.204 - AMMP

Review and sign

Dear Grant Recipient,

Please find attached STD 204 Form.

AMMP Projects Awards are conditional upon the applicant's intent to proceed with the grant agreement process by submitting a completed Payee Data Record (STD 204) form within 7 business days.

Important - Click to see examples of specific STD 204s -
https://www.cdfa.ca.gov/oefi/sweep/STD204_PayeeDataRecordExamples.html

If you have any questions, please email to cdfa.oefi_ammptech@cdfa.ca.gov.

Sincerely,

AMMP Team
Office of Environmental Farming and Innovation (OEFI)
California Department of Food and Agriculture

How to Complete the STD 204 Form

- Page 2 of the form has detailed Instructions – please review.
- **EXAMPLES AVAILABLE**
<https://www.cdfa.ca.gov/oefi/sweep/STD204PayeeDataRecordExamples.html>

STD 204 Payee Data Record Examples

- ▶ Example STD 204 for a SOLE PROPRIETORSHIP using a SSN 
- ▶ Example STD 204 for a SOLE PROPRIETORSHIP using a FEIN 
- ▶ Example STD 204 for Single Member LLC using SSN of Single Member 
- ▶ Example STD 204 for Single Member LLC using FEIN of LLC 
- ▶ Example STD 204 for Partnership 
- ▶ Example STD 204 for Individual Supplier 
- ▶ Example STD 204 for Grantor Trust (Living Trust while grantor is alive) 
- ▶ Example STD 204 for ESTATE 
- ▶ Example STD 204 of a Corporation - All others 

Select relevant example based on 1. What is your business entity type? 2. Using SSN# or FEIN #?

STD 204 Payee Data Record

- Add your grant Application number
- You can find your application number in your “2024 CDFA AMMP Grant Award Information” notification email

STATE OF CALIFORNIA – DEPARTMENT OF FINANCE

PAYEE DATA RECORD

(Required when receiving payment from the State of California in lieu of IRS W-9 or W-7)
STD 204 (Rev. 03/2021)

APPLICATION NUMBER

*

Section 2 Entity Type

- If you are submitting as an individual, select “Sole Proprietor/Individual”
- If you need assistance completing this section, see the second page of the STD 204 form (Instructions) for examples, or use your W-9 or W-7.

Section 2 – Entity Type	
Check one (1) box only that matches the entity type of the Payee listed in Section 1 above. (See instructions on page 2)	
<input type="checkbox"/> SOLE PROPRIETOR / INDIVIDUAL	<input type="checkbox"/> CORPORATION (see instructions on page 2)
<input type="checkbox"/> SINGLE MEMBER LLC <i>Disregarded Entity owned by an individual</i>	<input type="checkbox"/> MEDICAL (e.g., dentistry, chiropractic, etc.)
<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> LEGAL (e.g., attorney services)
<input type="checkbox"/> ESTATE OR TRUST	<input type="checkbox"/> EXEMPT (e.g., nonprofit)
	<input type="checkbox"/> ALL OTHERS

Section 3 Tax Identification Number

- Add the SSN or the FEIN number for the individual or entity identified in the “Name” field in Section 1
- Only fill out 1 - *Either* SSN or FEIN number

Section 3 – Tax Identification Number	
<p>Enter your Tax Identification Number (TIN) in the appropriate box. The TIN must match the name given in Section 1 of this form. Do not provide more than one (1) TIN. The TIN is a 9-digit number. Note: Payment will not be processed without a TIN.</p> <ul style="list-style-type: none">• For Individuals, enter SSN.• If you are a Resident Alien, and you do not have and are not eligible to get an SSN, enter your ITIN.• Grantor Trusts (such as a Revocable Living Trust while the grantors are alive) may not have a separate FEIN. Those trusts must enter the individual grantor’s SSN.• For Sole Proprietor or Single Member LLC (disregarded entity), in which the sole member is an individual, enter SSN (ITIN if applicable) or FEIN (FTB prefers SSN).• For Single Member LLC (disregarded entity), in which the sole member is a business entity, enter the owner entity’s FEIN. Do not use the disregarded entity’s FEIN.• For all other entities including LLC that is taxed as a corporation or partnership, estates/trusts (with FEINs), enter the entity’s FEIN.	<p>Social Security Number (SSN) or Individual Tax Identification Number (ITIN)</p> <p>_____</p> <p>OR</p> <p>Federal Employer Identification Number (FEIN)</p> <p>* _____</p> <p>_____</p>

Section 4 Payee Residency Statuses

- For this Program, recipient needs to be a California Resident

Section 4 – Payee Residency Status (See instructions)

- * **CALIFORNIA RESIDENT** – Qualified to do business in California or maintains a permanent place of business in California.
- CALIFORNIA NONRESIDENT** – Payments to nonresidents for services may be subject to state income tax withholding.
 - No services performed in California
 - Copy of Franchise Tax Board waiver of state withholding is attached.

Section 5 Certification

- Name of Authorized Payee Representative - If Sole Proprietor/Individual, needs to be the same name used in Section 1's "Name" field
- The Authorized Payee should be the person that will be the Grant Manager in the Grant Agreement.
- Title: example – Owner, Partner, President, CEO, Manager

Section 5 – Certification		
<i>I hereby certify under penalty of perjury that the information provided on this document is true and correct. Should my residency status change, I will promptly notify the state agency below.</i>		
NAME OF AUTHORIZED PAYEE REPRESENTATIVE *	TITLE *	E-MAIL ADDRESS *
SIGNATURE * Click here to sign	DATE *	TELEPHONE (include area code) *

How to Complete the STD 204 Form - Continued

- The information you put in this document (name, mailing address) will be what is used on the reimbursement checks
 - After a grant agreement is established, any changes to the mailing address will require additional documentation and may affect payment processing time
- You will not be able to submit the form through Adobe Sign unless all required fields are completed
- *Submitting the form does not mean the process is complete* – we will do an initial scan and send it forward for final review and approval, but corrections or clarifications may be needed

What happens to the submitted form?

- Information entered and submitted through the Adobe Sign form is encrypted and secure
- Only specific/limited State staff have access to the form and it is stored securely
- The result of processing this form is establishing a valid **Supplier ID** with the State so that you can receive reimbursement payments under your grant agreement



STEP #2

Pre-Project Consultation (PPC)



Conducted by Program staff



Objectives: confirm project site information and points of contact; discuss implementation plans; make any changes or corrections needed; review program requirements and resources



Helps finalize project information that will go into formal Grant Agreement



Program will reach out by email to schedule a phone call or virtual meeting

STEP #3

Email from the Program

- An email (informational only) will be sent to let the recipient know when their grant packet paperwork has been moved to OGA.
- Email will come from cdfa.oefi_ammp_tech@cdfa.ca.gov
- Note: OGA can take up to 90-120 days to process a recipient's grant agreement.

STEP # 4

Email from OGA

IMPORTANT

- OGA will send the recipient an email with instructions to **review** the Grant Agreement information, **sign** and **return**.
- *On page 2 of the grant agreement – if the recipient needs to include an **Administrative** and/or **Fiscal Contact** for CDFA grant activities (e.g., invoicing, modification requests), enter them now. Allows CDFA to communicate with these individuals about the grant.*
- Your grant agreement is NOT yet complete! Please sign and return as soon as possible to OGA to continue with the execution process.

STEP #5

Second Email from OGA

- Recipient will get an email from OGA with a copy of the **Executed Grant Agreement**.
- Save a copy of your Executed Grant Agreement.
- The Grant Agreement will have an Agreement number (generally top right of first page) – please keep note of it. This number is the recipient's contract number and should be referenced for all future correspondence with the program.



STEP #6

Introduction Email from Program

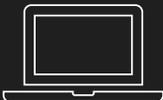
- Recipient will receive an **Introduction Email** from their assigned program analyst, via cdfa.oefi_ammp_tech@cdfa.ca.gov
- The email will contain important information, including:
 - When project implementation can begin.
 - Link to the Grant Award Procedures (GAP) manual.
 - Attachments - CDFA Invoice template and Proof of Expenditures template for reimbursement requests.

Notes and Reminders

- AMMP grants are funded by the State of California
- Funds allocated to this program come with deadlines to be encumbered (attached to a grant agreement) and used up, otherwise they can be lost
- Your executed grant agreement is conditional upon your timely responses and cooperation with each of these steps discussed
- **Communication is key** – ensure your contact information is correct; check your spam folder; add the AMMP email to your contacts



Contacts and References



<https://www.cdfa.ca.gov/oefi/AMMP/>



cdfa.oefi_ampp_tech@cdfa.ca.gov

Your CDFA AMMP Team

- AMMP Inbox: cdfa.oefi_ampp_tech@cdfa.ca.gov
- Current Program staff:
 - AMMP Lead – Alyssa Louie
 - AMMP Grant Analyst – Greg Ferrero
 - Methane Reduction Programs Supervisor – Roberta Franco
 - Program Analysts Supervisor – Silvia Covarrubias

Technical Assistance Providers

- https://www.cdfa.ca.gov/oefi/technical/docs/2023_ampp_taps.pdf
- <https://ciwr.ucanr.edu/Programs/ClimateSmartAg/TechnicalAssistanceProviders/>

Terminology/Acronyms

- ✓ AMMP = Alternative Manure Management Program (may be referred to as the “Program”)
- ✓ CDFA = California Department of Food and Agriculture
- ✓ OGA = CDFA’s Office of Grants Administration
- ✓ PPC = pre-project consultation
- ✓ Recipient = grant recipient (may also see referred to as awardee, grantee)



Thank you for attending!

- Questions?
- Next up..informational meeting on grant award procedures (implementation phase) will be scheduled in summer 2025



**Alternative Manure
Management Program**

CDFA OFFICE OF ENVIRONMENTAL FARMING & INNOVATION